



District of Columbia CAPTIVE APPLICATION

BUSINESS PLAN SUMMARY – 22a

(This form replaces the coverage/reinsurance page in the original application)

Name of Captive: _____

Type of Captive: _____ Form of Organization _____

Captive Shareholder/Beneficial Owner: _____

Captive Manager: _____

1. List risks to be directly insured

Risk	Premium	Limits	Deductible	Rating*
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- a)
- b)
- c)
- d)
- e)

2. List all fronted policies

Risk	Front	Premium	Limits	Rating
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- f)
- g)
- h)
- i)
- j)

3. For each risk listed above, provide details of retention and reinsurance company

- a)
- b)
- c)
- d)
- e)
- f)
- g)
- h)
- i)
- j)

* R = Retrospectively rated, G = guaranteed cost (state confidence level used to develop premium, or if manual/industry rates used.)

4. Total Written Premium (end of year, all Lines) _____

5. Paid in Capital and Surplus _____

6. Estimated retained earnings (end of year) _____

7. Estimated Loss Reserves (end of year) _____

8. Calculation of Captive Operating Ratios:

Retained Loss and Allocated Loss Adjustment Expense: Net Written Premium

Acquisition costs and General and Administrative Expense: Net Written Premium

Unimpaired Surplus: Outstanding Loss Reserve

Net aggregate multi-line annual risk retained: Net written premium plus capital & surplus